

## **Supplemental Application Data Sheet**

### **Application Information**

Application number::	10/590,139
Filing Date::	06/30/05
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title:	ARTIFICIAL SPINAL DISC
Attorney Docket Number::	HO-P03203US0
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Neil
Family Name::	Duggal
City of Residence::	London
Country of Residence::	Canada
Street of mailing address::	1544 Gloucester Rd.
City of mailing address::	London
State or Province of mailing address::	ON
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	N6G 2S6

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status: Full Capacity  
Given Name:: Louise  
Family Name:: Raymond  
City of Residence:: London  
Country of Residence:: Canada  
Street of mailing address:: 1544 Gloucester Rd.  
City of mailing address:: London  
State or Province of mailing address:: ON  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: N6G 2S6

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status: Full Capacity  
Given Name:: Daniel  
Middle Name:: R.  
Family Name:: Baker  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 13203 39th Ave. NE  
Suite 101  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98125-4615

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status: Full Capacity

Given Name:: Robert  
Family Name:: Conta  
City of Residence:: Mercer Island  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 3650 92nd Ave SE  
City of mailing address:: Mercer Island  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98040

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Carly  
Middle Name:: A.  
Family Name:: Thaler  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 3912 Corliss Ave N  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98103

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: T.  
Family Name:: Stinson  
City of Residence:: Woodinville  
State or Province of Residence:: WA

Country of Residence:: US  
Street of mailing address:: 14241 NE Woodinville-Duvall Road, #415  
City of mailing address:: Woodinville  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98072

### Correspondence Information

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### Representative Information

Representative Customer Number:: 26271

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2005/02313 4	06/30/2005
PCT/US2005/02313 4	An application claiming the benefit under 35 USC 119(e)	60/584,240	06/30/04
PCT/US2005/02313 4	An application claiming the benefit under 35 USC 119(e)	60/658,161	03/04/05

### Foreign Priority Information

**Assignee Information**

Assignee name::	Synergy Disc Replacement, Inc.
Street of mailing address::	1544 Gloucester Rd.
City of mailing address::	London
State or Province of mailing address::	ON
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	N6G 2S6